

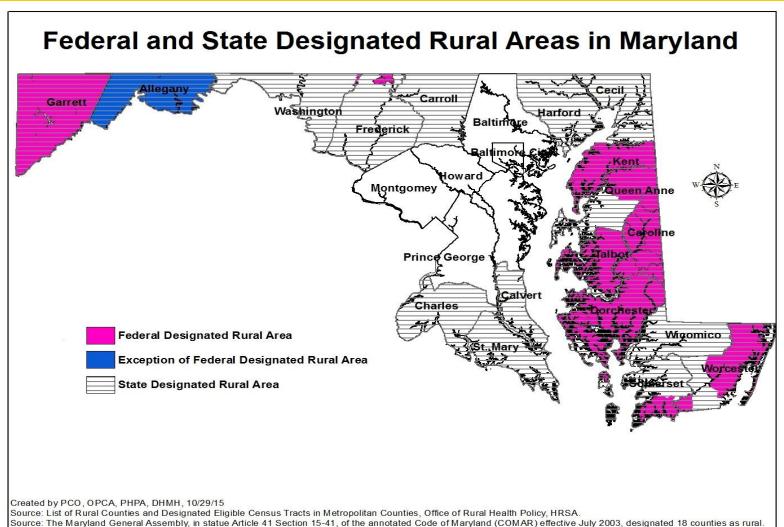
Maryland Mid Shore Counties: Understanding Rural Communities and Rural Health Delivery

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Presented to: Rural Health Summit

Date: 8/30/16





* Allegany County is deemed metropolitan by HRSA, however area can apply for rural grants due to a large prison population stipulation.





Background and Introduction

- Maryland population size- 6,006,401 (2016 est)
- Rural population-739,221
- Five Mid Shore counties population- 171,166
- There are 47 acute general hospitals in Maryland
- 17 rural acute general hospitals
- 2 Small Rural Hospitals (SHIP)
- Maryland does NOT have any Critical Access Hospitals (No FLEX Programs)
- There are NO Rural Health Clinics in Maryland.
- Maryland has 17 Federally Qualified Health Centers that provide services at 136 sites in the state.
- 7 FQHCs in rural counties and 86 sites
- NO FQHC look-alikes





Mid-shore Demographic Information

	Caroline	Dorchester	Kent	Queen Anne's	Talbot	Maryland
Life Expectancy	76.4	78.0	79.8	79.2	81.3	79.8
HS Graduation	84%	84%	88%	93%	91%	85%
Some College	43%	51%	56%	67%	60%	68%
Non Hispanic African American	13.90%	27.60%	14.60%	6.70%	12.70%	29.30%
American Indian Alaskian Native	0.80%	0.50%	0.30%	0.40%	0.30%	0.60%
Asian	1.00%	1.10%	1.00%	1.10%	1.50%	6.40%
Native Hawaiian Pacific Islander	0.40%	0.00%	0.10%	0.00%	0.20%	0.10%
Non Hispanic White	77.00%	64.50%	78.50%	86.90%	78.10%	52.60%
Hispanic	6.40%	4.60%	4.30%	3.40%	6.30%	9.30%
Median Income	\$49,573.00	\$42,279.00	\$53,288.00	\$80,650.00	\$54,836.00	\$73,900.00
Population	32,538	32,578	19,820	48,804	37,643	5,976,407

Source: Robert wood Johnson Foundation



Access to Insurance

	Caroline	Dorchester	Kent	Queen Anne's	Talbot	Maryland
Uninsured Total	14%	13%	14%	10%	13%	12%
Uninsured Adults	17%	16%	16%	12%	15%	14%
Uninsured Children	6%	5%	6%	6%	6%	5%

Source: Robert wood Johnson Foundation





Health Care Resources

Facilities	Caroline	Dorchester	Kent	Queen Anne's	Talbot	5 Counties	Maryland
Adult Medical Day Care Facilities	1	2	1	0	0	4	119
Freestanding Ambulatory Care Facilities - Freestanding Ambulatory Surgical Facilities	0	0	0	3	4	7	337
Assisted Living Programs	8	5	10	6	7	36	1531
Freestanding Ambulatory Care Facilities - Freestanding Birthing Centers	0	0	0	0	0	0	2
Comprehensive Rehabilitation Outpatient Facilities	0	0	0	0	0	0	1
Freestanding Ambulatory Care Facilities - Freestanding Kidney Dialysis Centers	0	1	1	1	2	5	151
Hospice Care Programs	1	0	0	1	1	3	27
Home Health Agencies	0	0	1	0	2	3	55
Health Maintenance Organizations	0	0	0	0	0	0	7
Acute, General & Special Hospitals	0	3	1	0	1	5	64
Laboratory - Tissue Bank	0	1	1	1	1	4	113
Laboratory - In Hospital	0	1	1	0	1	3	57
Laboratory - Commercial Reference	0	0	0	0	3	3	170
Comprehensive Care Facilities and Extended Care Facilities Nursing Homes	2	2	3	1	2	10	230
Freestanding Ambulatory Care - Freestanding Major Medical Equipment Facilities	0	0	1	2	3	6	223
Nursing Staff Agencies	0	0	0	1	0	1	467
Nursing Referral Service Agencies	0	0	0	1	1	2	161
Outpatient Physical Therapy Centers	0	1	1	0	3	5	63
Portable X-ray Centers	0	0	0	0	0	0	8
Residential Service Agencies	0	3	3	0	8	14	981
Residential Treatment Centers	0	1	0	0	0	1	10
Surgical Abortion Facilities	0	0	0	0	0	0	13
FQHCs	15 Sites, 1 FQHC	4 Sites, 0 FQHC	1 Site, 0 FQHC	1 Site, 0 FQHC	8 Sites, 0 FQHC	28 Sites 1 FQHC	135 sites 17 FQHC





Shortage Designation

- "Health professional shortage area" (HPSA) is defined by having shortages of providers (Primary Care, Behavioral Health, and Dental) either by geographic, demographic (low income) and or institutional comprehensive health center, federally qualified health center or other public facility
- "Medically underserved areas/population" (MUA/P) are areas or population designated by HRSA as having too few Primary Care Providers, high infant mortality rate, high poverty and /or high elderly population





Shortage Designation Data

Shortage Designation Type	Caroline	Dorchester	Kent	Queen Anne's	Talbot	Mid Shore Counties	Maryland
Primary Care HPSA	3	1	0	0	1	5	32
Mental Health HPSA	2	1	1	1	0	5	35
Dental HPSA	3	1	1	1	3	9	26
MUA/P	1	1	1	2	1	6	46





Healthcare Challenges in the Mid Shore Counties

- Workforce shortages (PCP and specialty)
- Funding opportunities
- Health disparities
- Chronic disease
- Social determinates of health
 - Housing
 - Transportation
 - Social economic status
- Behavioral Health
 - Mental health
 - Substance abuse (opioid overdose)
- Aging physician population





Challenges to Rural Health Systems

- Aging population
- Poor and shrinking populations
- High poverty
- Rise in unemployment evaporation of local industry
- Lack of specialty providers
- Higher expenses than revenues
- Low utilization of hospitals





How Do We Define Adequate Access to Care

- Adequate access to care comprises of;
 - Coverage
 - Accessibility
 - Services
 - Timeliness
 - Workforce











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